

# The Relationship between Raising a Child with ADHD and Maternal Depression, Anxiety, Psychological Distress and Quality of Life

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## **Abstract:**

Attention Deficit Hyperactivity Disorder (ADHD) is one of the most prevalent neurodevelopmental disorders in children, affecting approximately 5–7% of school-aged populations worldwide. It is characterized by persistent inattention, hyperactivity, and impulsivity, which often interfere with social, academic, and family functioning. While much of the research focuses on the child's outcomes, the impact of ADHD extends significantly to parents—especially mothers, who typically assume the primary caregiving role. Mothers of children with ADHD face increased caregiving demands, higher stress levels, and societal stigma. Studies have consistently reported elevated rates of depression, anxiety, and psychological distress among these mothers compared with those of typically developing children. Moreover, the constant management of behavioral challenges, frequent conflicts at home and school, and feelings of inadequacy or blame can compromise maternal quality of life. Understanding this relationship is crucial for designing family-centered interventions that address not only the needs of children with ADHD but also the mental health and well-being of their caregivers.

**Keywords:** Attention Deficit Hyperactivity Disorder (ADHD), Mothers, Depression, Anxiety, Psychological distress, Quality of life, Caregiver burden, Parenting stress, Maternal mental health.

## **Introduction:**

Attention Deficit Hyperactivity Disorder (ADHD) is a major public health problem with enormous negative impact on the child, the family, schools, and society. Emotional issues, peer relationships, and poor social behavior are among the challenges that confront those children which can lead to increased stress and conflict within the family (1-3).

As mothers provide the majority of the caregiving duties, moms typically have worse mental health outcomes than fathers (4,5), lower self-esteem in addition to feel guiltier and greater isolation (6-8).

Raising a child with attention-deficit/hyperactivity disorder (ADHD) is associated with substantial burden to caregiver quality of life. Mothers continue to fulfill the role of primary caregiver for a majority of youth and therefore often bear the responsibility of initiating and maintaining treatment for their child, advocating for their child at school, and managing challenging behaviors at home **(9)**.

As a result, mothers often incur financial costs, such as increased medical spending, as well as personal costs, such as marital difficulty, depression, work loss and financial strain related to their child's ADHD and related academic, behavioral, and social difficulties. The cumulative toll associated with raising a child with ADHD presents substantial long-term risk for families, as caregiver burden to QoL is associated with poor child treatment outcomes as well as long-term negative mental and physical health consequences for families **(10)**.

The daily stress that mothers who find it difficult to regulate their child's behavior may be experiencing might lead to elevated levels of anxiety and depression. Having an ADHD child can lead to conflict in relationships and disturbances in the house. Maternal anxiety can be exacerbated by marital stress, difficulty in maintaining a healthy family life, and disagreements amongst siblings **(11)**.

In addition to social isolation, guilt, and self-blame are common emotions among mothers, and they can exacerbate anxiety and depression. Mothers should prioritize taking care of themselves, ask for help from friends, family, and partners, and seek mental health resources when necessary **(12)**.

Raising a child with ADHD may be challenging and stressful, which can affect family interactions. Parents may have challenges as a result of their child's behavior. Siblings of children with ADHD may feel animosity or jealousy towards their sibling if they believe their sibling is getting more attention or accommodations. They could also run into peculiar familial dynamics **(6)**.

Parental responsibilities, task distribution, and decision-making may be impacted by the fact that parents of ADHD children frequently take on an excessive amount of the caregiving burden. When organizing family gatherings, trips, or vacations, parents may need to take their child's need for structure and attention management into account. This suggests that if a family member has ADHD, modifications and accommodations would be necessary. This might affect the dynamics and general functioning of the family **(13)**.

Mothers of children with ADHD often face unique challenges and stressors in their daily lives. Understanding the relation between depression, anxiety, and family functioning can shed light on the specific mental health concerns experienced by these mothers. It can help identify risk factors for depression and anxiety and guide the development of targeted interventions to support their mental well-being **(14)**.

Maternal mental health, including depression and anxiety, can have a significant impact on parenting behaviors and child outcomes. Depression and anxiety may affect a mother's ability to provide consistent and effective parenting, which can, in turn, influence the overall family functioning and the child's ADHD symptoms. By examining the relationship between these factors, interventions can be developed to support positive parenting practices and improve child outcomes **(15)**.

### **Depression in mothers of children with ADHD:**

The common features of all the depressive disorders are sadness, emptiness, or irritable mood, accompanied by somatic and cognitive changes that significantly affect the individual's capacity to function **(10)**.

Compared to mothers of children without ADHD, mothers of children with ADHD have greater incidence of depression and depressed symptoms. Numerous reasons, such as the difficulties of raising a kid with ADHD, the reciprocal relationship between maternal depression and child behaviour, and possible genetic or biological factors, can be connected to this higher risk of depression **(16)**.

#### **Factors Contributing to Maternal Depression:**

##### ➤ **Challenges of Parenting:**

Parenting a child with ADHD can be demanding, leading to increased stress, frustration, and feelings of inadequacy in mothers (11).

Negative parenting strategies, such as being too critical or administering strict discipline, are more common among parents of children with ADHD (Smit et al., 2021). The behavior of their children, unfulfilled support needs, and social stigma are the main causes of parents' high levels of stress (Leitch et al., 2019).

##### ➤ **Reciprocal Influence:**

Maternal depression and child disruptive behavior can create a cycle where each influences the other, potentially exacerbating both (14).

##### ➤ **Environmental Reinforcement:**

Mothers may experience decreased positive reinforcement from their child's behavior, contributing to depressive symptoms (12).

##### ➤ **Ineffective Discipline:**

Mothers experiencing depression, may struggle with implementing effective discipline strategies, further impacting the parent-child relationship (Piscitello et al., 2022).

##### ➤ **Genetic and Biological Factors:**

Emerging research suggests a potential link between maternal depression during pregnancy and an increased risk of ADHD in offspring (11).

#### **Impact of Maternal Depression:**

##### ➤ **Adverse Outcomes for Children:**

Maternal depression can negatively impact a child's development, potentially leading to conduct problems, depression, and even suicide attempts (13).

Caregiver depression is associated with an increased risk of persistence of ADHD symptoms (17) as well as conduct disorder symptoms (18).

Maternal depression appears to be associated with less positive and more negative parenting. Parents not only tend to engage in less positive parenting, such as being involved or providing warmth but also, they may engage in more negative parenting, such as being over-reactive and critical, or providing inconsistent discipline and structure (19).

##### ➤ **Intervention Challenges:**

Maternal depressive symptoms can interfere with the effectiveness of interventions for ADHD (6).

##### ➤ **Parent-Child Interaction:**

Maternal depression is linked to distorted perception and negative cognitions, which makes it challenging for them to successfully communicate with their children and assess their behavior (20).

Parents who experience depression, loss of interest in pleasurable activities, problem with concentration, or struggle with making decisions may find it challenging to interact positively with their children (19), and negatively affect the quality of parent-child interactions, potentially leading to less positive interactions and difficulties in managing the child's behavior (15).

#### **Seeking Help:**

##### ➤ **Routine Screening:**

Psychiatrists should consider routine screening for maternal depression when children are diagnosed with ADHD (16).

**Gokcen et al., (21)** emphasized that treating children with ADHD has reduced mothers' levels of depression and burnout and will improve the mother-child relationship, which will have a good impact on the child's symptoms. Therefore, it is necessary to take these moms' screening and counseling into consideration **(22)**.

➤ **Integrated Treatment:**

Integrated treatment approaches that address both the child's ADHD and the mother's depression may be beneficial. Depression is a very common disorder encountered by the primary care provider, psychiatrist, and mental health worker, coordinating as an interprofessional healthcare team. The disorder has extremely high morbidity including the risk of suicide **(14)**.

All healthcare workers should be knowledgeable about this disorder and refer the patient to a psychiatrist if there is a risk of self-harm. Education plays an important role in the successful treatment of major depressive disorder. This would include the education of the family and the patient. Lack of accurate information and misperceptions of the illness as a personal weakness leads to painful stigmatization and avoidance of the diagnosis by many of those affected **(23)**.

Patients should know the rationale behind the choice of treatment, potential adverse effects, and expected results. **(10)**.

➤ **Support Systems:**

Due to the pressure of balancing their children's requirements with household tasks, mothers are known to experience higher levels of depression. In the absence of additional support, these women may feel alone, overworked, and unsatisfied with their life **(24)**.

**Karimzadeh et al., (25)** found that a large number of women frequently experience feelings of hopelessness and helplessness because of being alone while raising their children with ADHD. As a result, some of these mothers become frustrated and feel alone and powerless when dealing with their child's issue

Mothers need strong support systems, including access to mental health services, parenting support groups, and educational resources. Engaging family members can be a critical component of a treatment plan supervised by a psychiatrist. Family members are helpful informants, can ensure medication compliance, be a big source of social support and can encourage patients to change behaviors that perpetuate depression (e.g., inactivity) **(11)**.

Patients with moderate to severe depression should also be seen by a social worker to ensure that they have a support system and finances for treatment. If there is a concern, the person managing the case should present the issues to the interprofessional team so that a plan can be developed to get the patient the care they need **(12)**.

Overall, depression is managed by an interprofessional team dedicated to the management of mental health disorders. Open communication between all the members of the interprofessional team is the key to lowering the morbidity of the disorder **(14)**. Family support is highly correlated with better psychosocial and health outcomes for children **(26)**

**Anxiety and distress in mothers of children with ADHD:**

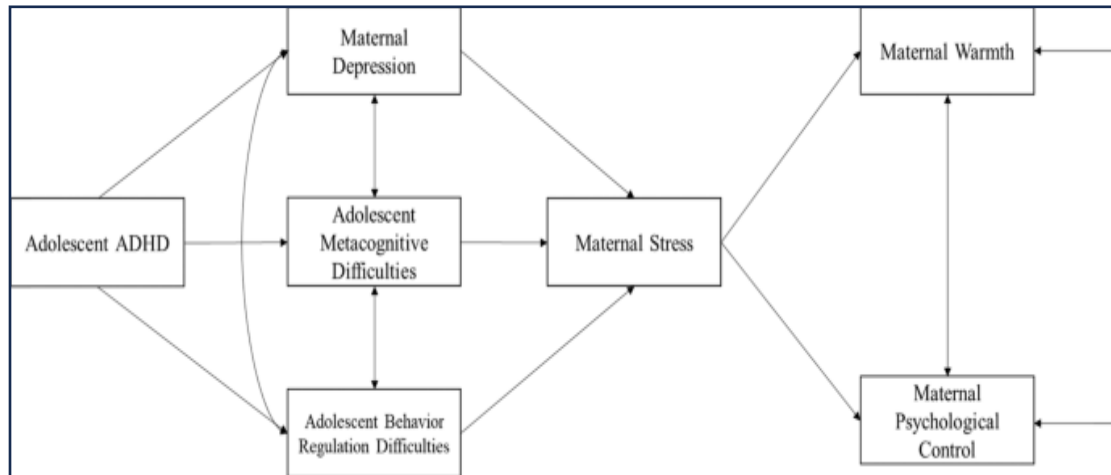
Fear is an automatic neurophysiological state of alarm characterized by a fight or flight response to a cognitive appraisal of present or imminent danger (real or perceived). Anxiety is linked to fear and manifests as a future-oriented mood state that consists of a complex cognitive, affective, physiological, and behavioral response system associated with preparation for the anticipated events or circumstances perceived as threatening **(13)**.

Pathological anxiety is triggered when there is an overestimation of the perceived threat or an erroneous danger appraisal of a situation which leads to excessive and inappropriate responses. Anxiety is one of the most

common psychiatric disorders, but the true prevalence is not known as many people do not seek help or clinicians fail to make the diagnosis (6).

Parents of children with ADHD have increased levels of distress, decreased parenting esteem and feelings of parental incompetence (27).

Because of the difficulties of raising a kid with ADHD, mothers of these children frequently suffer from high levels of worry and sadness. Managing behavioural problems, negotiating the difficulties of diagnosing and treating ADHD, and adjusting to the emotional and social toll on the family are a few examples of these difficulties. Increased stress, decreased parental efficacy, and an increased risk of anxiety and depression can result from this (10).



**Figure (1): Theoretical model in which maternal parenting stress mediates the relationship between parenting behaviors and adolescent and maternal ADHD-related difficulties (28).**

**✚ Specific Factors Contributing to Anxiety and distress:**

➤ **Increased Parenting Stress:**

Managing the symptoms of ADHD, such as impulsivity, hyperactivity, and inattention, can be demanding and lead to high levels of parenting stress (16).

➤ **Social Stigma and Isolation:**

Mothers may face judgment or misunderstanding from others who are not familiar with ADHD, leading to social isolation and feelings of guilt or shame (15).

Mothers reported stress relating to new responsibilities as well as feeling like they were missing out on their daily activities and time for themselves, struggling with social isolation, and facing stigma from others in the community (7).

➤ **Financial Strain:**

The costs associated with ADHD, such as therapy, medication, and specialized educational support, can place a significant financial burden on the family (23).

➤ **Disrupted Daily Routines:**

Children with ADHD may have difficulty with sleep patterns and routines, which can disrupt the entire family's schedule and increase stress levels (13).

➤ **Impact on Family Dynamics:**

ADHD can strain marital and family relationships, leading to increased conflict and stress within the family unit (10).

➤ **Emotional Dysregulation:**

Children with ADHD may have difficulty regulating their emotions, leading to frequent outbursts or meltdowns that can be emotionally draining for the mother (29).

➤ **Self-Blame and Guilt:**

Mothers may blame themselves for their child's ADHD or feel inadequate as parents, leading to feelings of guilt and self-doubt (16).

✚ **Consequences of Anxiety and distress:**

➤ **Parental Inefficacy:**

High anxiety can impair a mother's ability to parent effectively, leading to inconsistent or ineffective parenting practices (23).

➤ **Negative Impact on Child Outcomes:**

Maternal anxiety can negatively impact a child's behavior, emotional well-being, and academic performance (29).

➤ **Physical Health Problems:**

Chronic stress associated with raising a child with ADHD can lead to physical health problems for the mother (16).

➤ **Mental Health Issues:**

Maternal anxiety can exacerbate other mental health conditions, such as depression, and contribute to a decline in overall well-being (15).

✚ **Coping Strategies:**

➤ **Seeking Support:**

Connecting with other parents of children with ADHD, joining support groups, or seeking professional help can provide valuable support and reduce feelings of isolation. Anxiety disorders are very common and can present in diverse ways. Because the condition is underdiagnosed and associated with high morbidity, it is best managed by an interprofessional team consisting of psychiatrist, a mental health nurse, psychotherapist, social worker, and a primary care provider (12).

Family members need to be educated about the disorder and help monitor the symptoms and provide support. A mental health provider should closely follow these patients as suicidal ideations are not rare and educate the patient on different medications, their benefits, and potential adverse effects (10).

Collaboration between the team members is vital to ensure that no patient is neglected and that all patients are receiving an acceptable standard of care. The outlook for patients with anxiety is guarded. Data indicate that the high rates of mortality are associated with adverse cardiac events (29).

➤ **Mindfulness and Relaxation Techniques:**

Practicing mindfulness, meditation, or other relaxation techniques can help manage stress and anxiety (23).

➤ **Develop Coping Mechanisms:**

Learning effective coping strategies for managing stress, such as problem-focused coping or emotional-focused coping, can help mothers navigate challenging situations (16).

➤ **Self-Care:**

Prioritizing self-care activities, such as exercise, healthy eating, and getting enough sleep, can improve overall well-being and reduce anxiety (29).

➤ **Seeking Professional Help:**

Therapy, counseling, or medication can be helpful for managing anxiety and depression. Acute anxiety may require treatment with a benzodiazepine. Chronic anxiety treatment consists of psychotherapy, pharmacotherapy, or a combination of both (12).

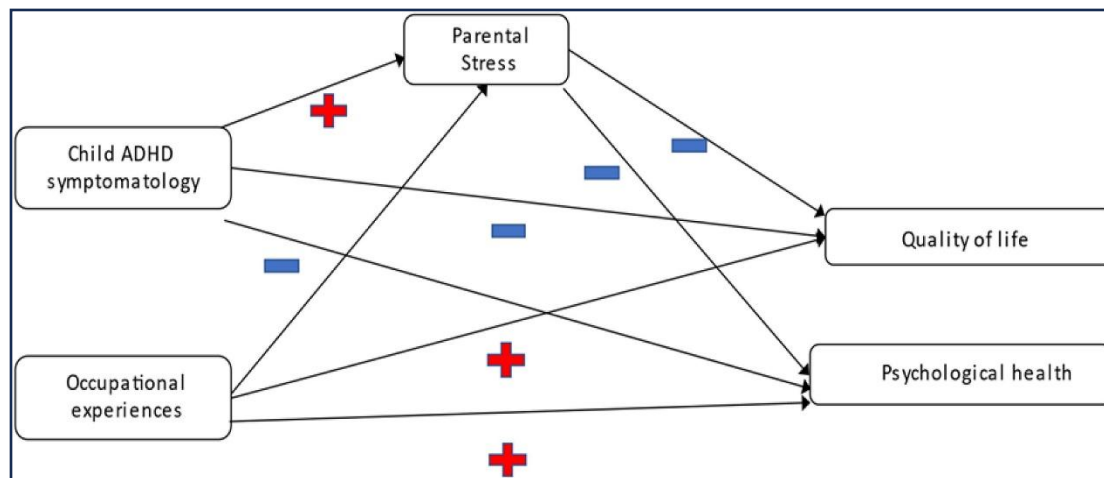
**Quality of life in mothers of children with ADHD:**

Attention Deficit Hyperactivity Disorder (ADHD) typically emerges in childhood with an average prevalence of 5% and accounts for a large proportion of burden of disease in youth. With the demands of the treatment and diagnosis, the need for care and support relies on their families in many ways (13).

The quality of life of parents of children with ADHD was markedly affected, particularly in terms of their psychological wellbeing and sense of personal fulfillment (30).

Parents fill an important role in caring for their child with ADHD and in providing tasks that parents of children without such conditions are not confronted with, such as initiating and supporting professional help seeking, coping with the complexity of ADHD-treatment, and with ADHD having a profound impact on their children’s learning at school (29).

Family support is strongly linked to improved health and better psychosocial outcomes for chronically ill children, and the relationship and functioning within the family may change over time coincident with different developmental stages and levels of autonomy. Many recent studies in clinical practice have also documented that ADHD in children negatively affects the parents’ quality of life (QoL), as well as their psychological well-being (10).



**Figure (2): A theoretical framework of factors related to the psychological health and QoL of mothers of children with ADHD (28).**

Likewise, parents’ perceived psychological well-being and stress may affect the child’s QoL, and the interventions that target parent stress and QoL have the potential of improvements in the child’s QoL as well as enhance their parents’ QoL. Research on ADHD often focuses on child, adolescent, and adult development, leaving parental QoL mainly unexplored, and the impact of a care receiver’s disorder on a caregiver has often been captured via concepts such as caregiver burden and parenting stress (15).

Although QoL of parents of children with ADHD is increasingly gaining more attention, and several studies have compared QoL of parents of children with ADHD to QoL of parents of typically general population norms, there is a lack of validated tools to measure QoL in this population **(6)**.

Quality of life is an important outcome measure in guiding healthcare and is held as a substantial parameter to evaluate the effectiveness of healthcare. The QoL concept has been defined in many ways. Highlighting the optimal state as one of general well-being in which an individual's day-to-day functioning across a wide range of domains is influenced by the potentially adverse impact of disease or disorder **(16)**.

Although a large number of different measures have been designed to capture QoL, there are few short self-reported questionnaires that cover functioning, social, and environmental contexts, and evidence is limited for scales assessing QoL among parents of children with ADHD **(23)**.

The brief generic Multicultural Quality of Life Index (MQLI) was developed to measure health-related quality of life in different cultures and is based on a critical review of global literature, comprising 10 dimensions of subjective quality of life, including aspects ranging from physical well-being to spiritual fulfillment, and a global perception of QoL **(13)**.

**Peñuelas et al., (27)** found that family burden, functioning, and quality of life were all negatively affected by the severity of their children's ADHD symptoms. Unexpectedly, inattention and combined subtypes appear to affect the family more than hyperactive subtypes

The measurements of well-being, broadly defined as “the quality and state of a person's life,” often differ by discipline and are frequently confused with related topics such as health-related quality of life as well as happiness and wellness. Both the concept of QoL and well-being concern evaluative judgments, meaning that each is an evaluation of life **(10)**.

ADHD has an impact on the caregiver's quality of life. These findings indicate how important it is to assess caregivers' quality of life as part of treatment plans **(31)**.

The difficulties in the management of ADHD children negatively affect the quality of mothers' lifestyles. Therefore, preventive, educational and therapeutic interventions are recommended to improve the mental health and the quality of life of mothers **(32)**.

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